

an infant before killing it or allowing it to die.

As horrifying as it may seem, the Subcommittee on the Constitution heard testimony indicating that this is, in fact, already occurring. According to eyewitness accounts, live-birth, so-called live-birth abortions, are indeed being performed, resulting in live-born premature infants who are simply allowed to die, sometimes without the provision of even basic comfort care such as warmth and nutrition.

On one occasion, a nurse found a living infant naked on a scale in a soiled utility closet, and on another occasion a living infant was found lying naked on the edge of a sink. One baby was wrapped in a disposable towel and thrown in the trash.

Consider that these things are happening today in this country. Now statements made by abortion supporters indicate that they support this expansion of the decision in *Roe v. Wade*. For example, on July 20 of this year, the National Abortion and Reproductive Rights Action League issued a press release criticizing H.R. 4292 because in NARAL's view extending legal personhood to premature infants who are born alive after surviving abortions substitutes an assault on *Roe v. Wade*.

Well, I think they are wrong in their interpretation of *Roe v. Wade*, and I do not agree with that opinion but even that opinion, if properly understood, could not be extended in that way, but that is what they advocate.

I urge my colleagues to consider this important legislation as it is considered by the House in the days to come.

CONGRESS SHOULD PASS A REAL PRESCRIPTION DRUG PLAN BEFORE THEY ADJOURN

The SPEAKER pro tempore (Mrs. BIGGERT). Under a previous order of the House, the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) is recognized for 5 minutes.

Ms. EDDIE BERNICE JOHNSON of Texas. Madam Speaker, I rise today to call my colleagues' attention to passing a real prescription drug plan before Congress adjourns. It is ironic that the Presidential candidate for the Republican Party has a new slogan about real plans for real people. I think we can all agree that senior citizens are real people and they need some real help.

As a registered nurse who has spent countless hours helping senior citizens with their medical needs, I can say what these real people need. They desperately need Medicare to cover the cost of buying lifesaving drugs. As a registered nurse, I had the pleasure of working with seniors before coming to Congress. I know firsthand that many of them are on fixed incomes and already struggling to buy food and pay their rent. I have paid close attention as to what we need to do as a nation to

help senior citizens. I can say that our seniors simply need assistance with purchasing life-sustaining drugs. They simply cannot afford the high cost of the drugs now.

When the big pharmaceutical companies escalate the prices of prescription drugs every year at a pace that exceeds the annual level of inflation, between 1993 and 1998, spending nationwide for prescription drugs increased at an annual rate of 12 percent. This past April, I hosted a town hall meeting back in Dallas where I talked with constituents, the real people, about the exorbitant cost of prescription drugs. And here are some of the other startling statistics that were revealed: 85 percent of the seniors fill at least one prescription per year for common conditions because for their age such as osteoporosis, hypertension, heart attacks, diabetes, or depression; seniors nationwide are paying over 130 percent more for essential prescriptions than the drug companies' most favorite customers, the HMOs; nearly two-thirds of Medicare beneficiaries have no drug coverage or unreliable, costly, and limited coverage and must pay these costs out-of-pocket; one-third of the Medicare beneficiaries have absolutely no coverage for prescription drugs at all.

What disturbs me even more are the statistics relating to the fat cat insurance industry and the pharmaceutical industry. Premiums and copays are rising; caps of \$500 to \$1,000 a year are being imposed frequently; drug companies' profits were actually three times more than the average profits of all other pharmaceutical companies. I understand that we have passed one bill that favors the pharmaceutical industry. That is not what the people need. The people really need, the real people, need a plan that is covered by Medicare because the profits, they talk about research, the profits outstrip their research budgets.

That is not true. The average compensation for a drug company's CEO was \$22 million a year in 1998. So if we look at all of these facts, we have to wonder how the other side could put together the plan that they have devised. It gives subsidies to the big insurance companies. It seems that penny-pinching actuaries are the other side's idea of real people, not to mention the big pharmaceutical companies. It is ironic that we have allowed all of this time to lapse and are about to leave to go home, and we have forgotten about the real people.

The American people, including the residents of Dallas, have had enough of the other side's stonewalling. The American people do not really need smoke and mirrors. They need a real prescription drug benefit for seniors, not a phony plan that relies on drug companies and insurance profiteers.

As we head toward the final stretch here, I hope that we can put the play-

ing aside, consider that these are really people and consider that they really need real relief and pass a Medicare prescription drug benefit and bring competition to the drug industry so that drug prices can be reduced for the seniors. This is really unconscionable. We are talking about people who have retired and who are on fixed incomes. We must give them relief. We cannot continue to just play.

LIES, LIES AND MORE LIES

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. FOLEY) is recognized for 5 minutes.

Mr. FOLEY. Madam Speaker, I am delighted to speak before the Congress today and the American people, and I would like to obviously go back to a subject of importance, but before I do I think it was very important the comments of the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) about prescription drugs. It is timely. It is important. I would remind all those listening, though, that we have been here, at least with this administration, for almost 7¾ years and just in the last several months have we seen conversation relative to prescription drugs.

The gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) quoted some statistics showing the increase in inflation and cost of drugs year in and year out, and she is correct. They have been going up year in and year out, but only in an election year did they finally come forward with a plan that would provide some degree of prescription drug coverage, but one has to read the plan to see exactly what it entails and make certain they are not getting trapped in another big government program.

I would remind the listeners that the Vice President in Florida made some comparisons about his mother-in-law and his dog taking a certain drug. Obviously those statistics and facts are not true. They were not true. They did not apply, but that did not keep him from saying them.

So I, again, in day two of veracity watch, will call attention to another claim made by the Vice President regarding Mr. Bush's tax plan. However, as many know now, the information was misleading, incorrect or not even relative. In Washington, a tax research group questioned the manner in which Mr. GORE is using its numbers to attack Mr. Bush. The Vice President says the average working American would save just 62 cents a day under his opponent's tax plan but Bob McIntyre, director of Citizens for Tax Justice, said the Democratic Presidential candidate is not representing his information correctly. It is a stretch I would not make, and that is a labor-financed group that made the calculations.